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INFORMATION DISCLOSURE		Application Number	10/616,082		
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		,	Group Art Unit	1636 \\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
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(use as many sheets as necessary)			necessary)	Examiner Name	M.K. Joike	
Sheet	2	of	2	Attorney Docket Number	GF0021YIB	

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Signature	Examiner Signature	Date Consider	red
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^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.